2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07099

FILED Feb 10, 2005 Secretary of State

Entity Name: OLD ENGLEWOOD VILLAGE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

411 W DEARBORN ST 441 W. DEARBORN ST.

ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 US

Current Mailing Address: New Mailing Address:

411 W DEARBORN ST 441 W. DEARBORN ST ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 US

FEI Number: 59-2519334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIFT, LESLIE LEE, STEVE

145 W DEARBORN ST 441 W. DEARBORN ST.

ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEVE LEE 02/10/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition Name:

RADKINS, JOHN MCCALL, GENE Name: 411 W. DEARBORN Address: 475 WEST DEARBORN ST. Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete Title: (X) Change () Addition

LEE, STEVE Name: VICTOR, GINA Name:

Address: 441 W. DEARBORN ST. Address: 120 W. DEARBORN ST. City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: Title: (X) Change () Addition () Delete

TEAPLE, B J RADKINS, JOHN Name: Name: 411 WEST DEARBORN ST. Address: 485 W DEARBORN Address:

City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete Title: SD (X) Change () Addition

Name: VICTOR, GINA Name: LEE, STEVE 441 WEST DEARBORN ST. Address: 120 W DEARBORN Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223

Title: () Delete Title: () Change () Addition

BISCEGLIA, VITO Name: Name: 211 S INDIANAN AVE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

HOLLINGER, TONI GIFT. LESLIE Name: Name: Address: 145 W DEARBORN Address: 362 W. DEARBORN ST. ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE LEE DS 02/10/2005